FEC FORM 1		STATEMEN ORGANIZA		Office Use Only	
1 NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines,	12FE4M5	
COMMITTEE TO ELECT DIRNA MCGINNESS					
ADDRESS (number and street)		54 VIEW	AIDGE		
(Check if address is changed)		FRIDAY NA	RBOR	NN 98850	
		a 1- ' web 45	CITY"	STATE ZIP CODE	
(Check if address is changed)  (Check if address is changed)  (Check if address is changed)					
COMMITTEE'S WEB PAGE ADDRESS (URL)					
(Check If address is changed)		DIANA FOR CONGRESS, COM			
2. DATE 4/84/10					
3. FEC IDENTIFICATION NUMBER C					
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete					
Typo or Print Name of Treasurer SHARDN CROZIER					
Signature of Treasurer Date 4.24.10					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the ponalties of 2 U.S.C. 4379.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information of federal Election Commission Trill Frap 8(U)-424-9530 Local 202-684-1100		